

Mental Health

MHQ-QUERI Update

February, 2005

Initiative

Improving Medication Management for Schizophrenia

Schizophrenia has a lifetime prevalence of 1.3% and affects more than two million Americans.1 The VHA treats approximately 100,000 patients with schizophrenia each year, accounting for 11.7% of total healthcare costs.2 Research indicates that medication treatment for schizophrenia often does not follow evidence-based recommendations regarding antipsychotic dose and use of newer antipsychotics.3,4 Consequently, it is important from both quality of care and economic perspectives to improve the patterns of medication management for schizophrenia and to assist in the development of optimal treatment for patients with this disorder.

Antipsychotic Treatment Improvement Program

Research

Recognizing the potential for improved management and outcomes of veterans with schizophrenia, VHA developed a comprehensive clinical practice guideline for this condition in 1997, and updated and approved it in 2004. The antipsychotic dosing recommendations in these guidelines are based on the following findings:

- Moderate antipsychotic doses are efficacious in reducing schizophrenia symptoms,^{6,7} and
- Guideline-concordant antipsychotic doses have been associated with superior symptom outcomes.^{8,9}

Noting the variation among VA facilities in the use of moderate antipsychotic doses,^{3,4} the Mental Health Quality Enhancement Research Initiative (MH-QUERI) developed an innovative program to reduce antipsychotic dosing that occurs outside of recommended ranges. MH-QUERI's Antipsychotic Treatment Improvement Program was developed in collaboration with the South Central MIRECC and VISN 16 Mental Health Product Line.

What the Antipsychotic Treatment Improvement Program Can Do for You

The MH-QUERI Program has been initiated at 4 facilities in VISN 16 as part of a quality enhancement demonstration project. Findings from this initial project show that it reduces antipsychotic prescribing at doses above the guideline-recommended range and reduces pharmacy costs for antipsychotics. Further, participating clinicians reported positive experiences with the Program's educational and support materials.

If you are concerned about your facility's antipsychotic dosing patterns and/or costs, the MH-QUERI Program offers pharmacy database diagnostic tools to assess your situation and an intervention program that are now available for use throughout VHA.

The Program includes:

- Patient education materials,
- Clinician education and support tools, and
- Automated performance data on antipsychotic prescribing practices.

Materials and assistance in implementing the Program are available through the MH-QUERI Coordinating Center.

Please see the back page for contact information.



How Do I Learn More?

For information about MH-QUERI and/or the Antipsychotic Treatment Improvement Program, contact:

Jeffrey L. Smith, PhD candidate

MH-QUERI Co-Implementation Research Coordinator

Phone: (501) 257-1066

E-mail: jeffrey.smith6@med.va.gov

Web Resources

For more information about MH-QUERI, visit their website at: www.va.gov/mhqueri/

For more information about the QUERI program in general, visit the national QUERI website at: www.hsrd.research.va.gov/queri

References:

- 1. Keith SJ, Regier DA, Rae DS. Schizophrenic disorders. In: Robins LN, Regier DA. Psychiatric disorders in America: The Epidemiologic Catchment Area Study. New York, NY: Free Press, 1991:33-52.
- 2. Yu W, Ravelo A, Wagner TH, Phibbs CS, Bhandari A, Chen S et al. Prevalence and costs of chronic conditions in the VA health care system. Medical Care Research and Review 2003; 60 (3): 146S-147S.
- 3. Leslie DL, Rosenheck RA. Use of pharmacy data to assess quality of pharmacotherapy for schizophrenia in a national health care system: Individual and facility predictors. Med Care 2001; 39:923-933.
- 4- Owen RR, Feng W, Thrush CR, Hudson TJ, Austen MA. Variations in prescribing practices for novel antipsychotic medications among Veterans Affairs hospitals. Psych Services 2001; 51:1523-1525.
- 5. Management of Psychoses. Washington, DC: VA/DoD Evidence-Based Clinical Practice Guideline Working Group, Veterans Health Administration, Department of Veterans Affairs, and Health Affairs, Department of Defense, May 2004. Office of Quality and Performance publication 10Q-CPG/PSY-04.
- Dixon LB, Lehman AF, Levine J. Conventional antipsychotic medications for schizophrenia. Schizophr Bull 1995; 21:567-577.
- Baldessarini RJ, Cohen BM, Teicher MH. Significance of neuroleptic dose and plasma level in the pharmacological treatment of psychoses. Arch Gen Psychiatry 1988; 45:79-91.
- 8. Owen RR, Thrush CR, Kirchner, JE, Fischer EF, Booth BM. Performance measurement for schizophrenia: Adherence to guidelines for antipsychotic dose. Int J Qual Health Care 2000; 12:475-82.
- 9. Owen RR. Quality of medication management for schizophrenia—final report, IIR Grant #95-020-2. Washington, DC: Department of Veterans Affairs, 2000.

MH-QUERI Executive Committee:

Research Coordinator, Richard Owen, MD and Clinical Coordinator, Stephen Marder, MD lead the Executive Committee. The MH-**QUERI** Executive Committee includes other experts in the field of mental health: Frederic Blow, PhD; Geoffrey Curran, PhD (Co-Implementation Research Coordinator); Nancy Jo Dunn, PhD; Susan M. Essock, PhD; Ellen Fischer, PhD; Martha Gerrity, MD, PhD; JoAnn Kirchner, MD; Miklos Losonczy, MD, PhD; Susan McCutcheon, RN, EdD; Lisa Rubenstein, MD, MSPH; Jeff Smith, PhD candidate (Co- Implementation Research Coordinator); William Van Stone, MD; and John Williams, Jr, MD, MHS.